

2008 Utah Wildfire Academy Nomination Form

Note: Only COMPLETED and LEGIBLE forms will be accepted!

Nominee's Name (Please Print Clearly):		Best Phone Number to Reach You:	
Course Number(s) & Name(s): (courses cannot overlap)		Indicate alternate choice(s), in case first choices are unavailable:	
Office Name & Address. (Ex: Ashley NF, Vernal RD):		Training Officer's Name & Phone Number:	
Working Job Title:		IQCS # (Federal Employees Only):	
Work Phone:		Supervisor's Name:	
Cell Phone:		Supervisor's Phone:	
E-mail Address:		Supervisor's E-mail:	
Do you meet all course prerequisites? Yes / No List your past experience <u>pertinent</u> to the course(s).		List training completed and dates <u>pertinent</u> to the course(s).	

PAYMENT

Nominations WILL NOT be processed without completion of the attached payment form.

Tuition: \$35 per day After April 30: \$45 per day	# days @ \$35/45 per day = \$	Total \$
Upon submission of this form, you agree that you will be charged for the course if you do not cancel by April 30, 2008.		
Nominee's Signature:	Supervisor's Signature:	

Attention Volunteer Fire Departments: Tuition costs will be covered for VFDs.

<h3 style="text-align: center;">Contact Information</h3> <div style="display: flex; justify-content: space-between;"> <div> <p>Jaki Nordrum Utah Wildfire Academy P.O. Box 45155 Salt Lake City, UT 84145-0155</p> </div> <div> <p>Phone: (801) 539-4127 Fax: (801) 539-4097 E-Mail: Jaki_Nordrum@blm.gov</p> </div> </div>	<ul style="list-style-type: none"> Please make a copy of this form for your records. Only complete nominations will be accepted. Payment must accompany nomination. Use attached credit card form or attach check. Mail, E-mail or fax this form to Jaki Nordrum.
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Do you work for a Volunteer
Fire Department?
Circle one: Yes No
Name of VFD:

Office Use Only	
<input type="checkbox"/> PW _____	<input type="checkbox"/> Paid ____/____/____
<input type="checkbox"/> IQCS _____	<input type="checkbox"/> Canceled ____/____/____
<input type="checkbox"/> CC Received	<input type="checkbox"/> Refund ____/____/____